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INDICATION FORM**

Application Number	10/522,043-Conf. #6728
Filing Date	October 13, 2005
First Named Inventor	Xin Lu
Title	Polypeptide
Art Unit	1642
Examiner Name	Sean E. Aeder
Attorney Docket No.	31265/5829

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

 Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

 Firm or Individual Name: Address: City: State: Zip: Country: Telephone: Email:

I am the:

 Applicant/Inventor. Assignee of record. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	6/3/08
Name	ANNE LANE	Telephone	0207 679 9000
Title and Company	UCL Cruciform Limited		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 *Total of 1 forms are submitted.